



**Aging and Disability Services Division  
Interpreter/CART Registry  
3416 Goni Rd., Suite D-132  
Carson City, NV 89706**

**Form A 4 – Educational Interpreter Application**

**Phone: 775-687-4210**

**Fax: 775-687-0576**

**Email: [jabalderson@adsd.nv.gov](mailto:jabalderson@adsd.nv.gov)**

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**Section A Application Procedures/Checklist:**

- Current Photo (Passport size)
- Photocopy of current picture identification with date of birth (e.g. Driver's License)
- Completed Application (Requires Notary)
- Signed, completed Code of Professional Conduct form (Requires Notary)
- Photocopy of current certifications
- Professional Development Form (Not required for Advanced Level)
- Mentor form (Not required for Advanced Level)

**Section B Registration Category:**

- € Initial Application
- € Registration Renewal
- € Registration Update
- € Registration Reinstatement

**Each level of certification requires graduation from High School or completion of the GED:**

€ I am a high school graduate (Attach documentation) Year graduated: \_\_\_\_\_

Name and location of High School: \_\_\_\_\_

\_\_\_\_\_

€ I have completed and passed the GED (Attach documentation)

Year GED passed and name and address of issuing Institution: \_\_\_\_\_

€ Neither apply, I have attached an explanation page.

**School System where you currently work, if applicable:** \_\_\_\_\_

**Date of Employment:**

From: \_\_\_\_\_ Until: \_\_\_\_\_

**Supervisor's contact information:**

Name: \_\_\_\_\_ Phone/fax: \_\_\_\_\_

Email: \_\_\_\_\_

Type of Employment: ☐ Full-time ☐ Part-time ☐ Sub

**I am registering for the following category and hold the following certifications:**

**Educational Setting: Cued Speech Transliterator:**

€ Certified by TECUnit

€ Other (Explain)\_\_\_\_\_

**Educational Setting: Apprentice Level:**

€ EIPA 3.0 Grade level (s) Assessed: \_\_\_\_\_Modality Assessed:\_\_\_\_\_

- I am/am not an Associate member of RID and participate in their ACET Program (If yes, provide RID member number)
- I do/do not have a mentor (mentor form attached)
- I do/do not have a Professional Development Plan (Form attached)

**Educational: Intermediate Level**

€ EIPA 3.1-3.9 Grade level (s) Assessed: \_\_\_\_\_Modality Assessed:\_\_\_\_\_

- I am/am not an Associate member of RID and participate in their ACET Program (Provide RID member number)
- I am/am not Registered with RID as a “Certified Educational Interpreter” (Provide copy of Certification proof)
- I do/do not have a Professional Development Plan (Form attached)

**Educational: Advanced Level**

€ EIPA 4.0-5.0 Modality Assessed:\_\_\_\_\_

- I am/am not Registered with RID as a “Certified Educational Interpreter” (Provide copy of Certification proof)
- I do/do not have a Professional Development Plan (Form attached)

**Section C Applicant information:**

Full, Legal name of applicant  (Include Alias or other names in parenthesis)	
Address where you can be reached	

City	State	Zip Code
Home Phone	Cell Phone	Work or other phone
Email		

**Please indicate the contact information you want on the registry: (Name and certification information is mandatory):**

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**Additional Questions**

1. \_\_\_\_Yes \_\_\_\_No      Have there been any substantiated allegations of a code of ethics violation(s) pertaining to interpreting/transliterating practice by any certifying body?
  
2. \_\_\_\_Yes \_\_\_\_No      Has there been any adverse verdict as a result of any civil suit regarding your professional malpractice?
  
3. \_\_\_\_Yes \_\_\_\_No      Have you ever had an interpreter/transliterators credential denied, revoked, or suspended within the past ten years?
  
4. \_\_\_\_Yes \_\_\_\_No      Are there any pending actions related to a denial, revocation, or suspension of any interpreter/transliterators credential?
  
5. \_\_\_\_Yes\* \_\_\_\_No      Have you been convicted of a crime under any laws within the past ten years?

\*If yes, please attach a separate sheet detailing the nature of the conviction, date(s) and locations of the event

6. \_\_\_\_ Yes\* \_\_\_\_ No      Are any criminal charges currently pending against you?

\*If yes, please attach a separate sheet detailing the nature of the conviction, date(s) and locations of the event

7. \_\_\_\_ Yes \_\_\_\_ No      Is there any condition which would prevent you from providing interpreting service?

**Section D Certification of Applicant:**

**Certification**

I hereby agree and have knowledge of and comply with the standards set forth in Nevada Revised Statute 656A governing the provision of Interpreting and CART Services and understand the types of misconduct for which disciplinary action may be initiated against me pursuant to these regulations.

I hereby certify that the preceding information is correct to the best of my knowledge. I agree to abide by and follow the NAD-RID Code of Professional Conduct as set forth in section 40 (1) (e) of Nevada Revised Statute 656A.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

State of \_\_\_\_\_

County of \_\_\_\_\_

On the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_, before me, the undersigned, a Notary Public in and for the county and state aforesaid, personally appeared \_\_\_\_\_, known to me to be the person named above and who executed the foregoing instrument, and he/she acknowledged to me that he/she executed the same freely and voluntarily.

BY: \_\_\_\_\_

Notary

\_\_\_\_\_  
Affix Notary Seal